### Case 16-81055 Doc 1 Filed 04/28/16 Entered 04/28/16 11:34:23 Desc Main Document Page 1 of 66

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourse	f	
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is your government-issu picture identification (example, your driver's license or passport).	ed First name for	First name  Middle name
	Bring your picture identification to your meeting with the trustee.	Swiggum  Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you used in the last 8 ye Include your married maiden names.	ars FKA Jennifer Lynn Hullinger	
3.	Only the last 4 digits your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6209	

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Case number (if known)

Debtor 1 **Jennifer Lynn Swiggum** 

		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years  Include trade names and doing business as names		■ I have not used any business name or EINs.		☐ I have not used any business name or EINs.  Business name(s)			
		EINS		EINs			
5.	Where you live	515 Woodrow Street Rockford, IL 61101-4962		If Debtor 2 lives at a different address:			
		Number, Street, City, State & ZIP Code	-	Number, Street, City, State & ZIP Code			
		Winnebago County	_	County			
		County		County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.		If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	_	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition,		Check one:  Over the last 180 days before filing this petition, I			
		I have lived in this district longer than in any other district.		have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Debtor 1 **Jennifer Lynn Swiggum** 

Case number (if known)

ar	t 2: Tell the Court About	our E	Bankruptcy Ca	ise				
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.  Chapter 7						
	choosing to file under							
			hapter 11					
			hapter 12					
			hapter 13					
3.	How you will pay the fee		about how yo	pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details t how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with				
					allments. If you choose this of (Official Form 103A).	option, sign and attach the Application	on for Individuals to Pay	
			I request tha	t my fee be wa	ived (You may request this or	otion only if you are filing for Chapte		
			applies to you	ur family size an	d you are unable to pay the fe	f your income is less than 150% of the in installments). If you choose thin Difficial Form 103B) and file it with you	s option, you must fill out	
).	Have you filed for bankruptcy within the last 8 years?	■ N						
	last o years:	<b>Ц</b> 16	es. District		When	Case number		
			District		When When	Case number _ Case number		
			District		When	Case number		
			Diomot		·····on			
10.	Are any bankruptcy cases pending or being	■ N	0					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	es.					
			Debtor			Relationship to you		
			District		When	Case number, if kr	nown	
			Debtor			Relationship to you		
			District		When	Case number, if kr	nown	
11.	Do you rent your residence?	■ N	o. Go to I	ine 12.				
		☐ Ye	es. Has yo	our landlord obta	ined an eviction judgment aga	ainst you and do you want to stay in	your residence?	
				No. Go to line 1	12.			
				Yes. Fill out <i>Ini</i> bankruptcy peti		ion Judgment Against You (Form 10	01A) and file it with this	

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Debtor 1	Jennifer Lynn Swiggum	Document	Case number (if known)	

ar	Report About Any Bu	sinesses	You Own	as a Sole Proprietor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	and location of business			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any			
	If you have more than one sole proprietorship, use a		Numb	er, Street, City, State & ZIP Code			
	separate sheet and attach it to this petition.		Check	k the appropriate box to describe your business:			
				Health Care Business (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as defined in 11 U.S.C. § 101(53A))			
				Commodity Broker (as defined in 11 U.S.C. § 101(6))			
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropria lines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement tions, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedu U.S.C. 1116(1)(B).				
	For a definition of small	■ No.	I am n	not filing under Chapter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bar Code.				
		☐ Yes.	I am fi	iling under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
ar	t 4: Report if You Own or	Have Any	Hazardo	ous Property or Any Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is t	the hazard?			
	public health or safety? Or do you own any						
	property that needs immediate attention?			diate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?			
	-			Number, Street, City, State & Zip Code			

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Debtor 1 Jennifer Lynn Swiggum

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Document Page 6 of 66 Case number (if known) Debtor 1 Jennifer Lynn Swiggum Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jennifer Lynn Swiggum Signature of Debtor 2 Jennifer Lynn Swiggum

Executed on

MM / DD / YYYY

Signature of Debtor 1

Executed on April 28, 2016

MM / DD / YYYY

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Debtor 1 Jennifer Lynn Swiggum

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Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Jason H. Rock	Date	April 28, 2016	
Signature of Attorney for Debtor	<u></u>	MM / DD / YYYY	
Jason H. Rock			
BARRICK SWITZER LAW OFFICE Firm name			
6833 Stalter Drive			
Rockford, IL 61108			
Number, Street, City, State & ZIP Code			
Contact phone	Email address		
Bar number & State			

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Debtor 1 Jennifer Lynn Swiggum Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? □ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under □ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Do you estimate that Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No. are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 1,000-5,000 **25,001-50,000** you estimate that you □ 5001-10.000 **50.001-100.000** □ 50-99 owe? 10.001-25.000 ☐ More than 100,000 100-199 200-999 How much do you □ \$500,000,001 - \$1 billion □ \$0 - \$50,000 □ \$1,000,001 - \$10 million estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? ☐ \$10,000,000,001 - \$50 billion □ \$50.000.001 - \$100 million **\$100,001 - \$500,000** ☐ More than \$50 billion ☐ \$100,000,001 - \$500 million \$500,001 - \$1 million 20. How much do you \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities ☐ \$10,000,001 - \$50 million □ \$50,001 - \$100,000 \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million П \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ☐ More than \$50 billion \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States-Code, specified in this petition. I understand making a false statement concealing property, or obtaining money or property by fraud in connection with a benkruptcy case can result in figes ut to/\$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 35 Signature of Debtor 2 Jennifer Lynn Swiggum Signature of Debto Executed on Executed on

MM / DD / YYYY

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F .					
Fill in this infor	mation to identify your	case:			
Debtor 1	<del></del>				
Deptor	Jennifer Lynn Sw First Name	Viggum Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	i i maga e a dialente inches	
Case number (if known)					Check if this is an amended filing
Official Forr		an Individual	Debtor's Sc	hedules	12/15
If two married pe	eople are filing togethe	r, both are equally respo	nsible for supplying cor	rect information.	
obtaining money years, or both. 1		n connection with a bank		. Making a false statement, cond in fines up to \$250,000, or impris	
Did you pa	y or agree to pay some	one who is NOT an attor	ney to help you fill out b	pankruptcy forms?	The second secon
■ No					
Yes. I	Name of person			Attach Bankruptcy Petiti Declaration, and Signat	
that they are	alty of perjury, I declare the true and correct er Lynn/Swiggum re of Dector 1	that I have read the sum	mary and schedules file  X Signature of	d with this declaration and  Debtor 2	
	, , , , , ,				

24.	Has any governmental unit notified you that you	u may be liable or potentially liable t	ınder or in violation of an environme	ental law? **
	■ No □ Yes, Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any			n dia differenzia didiperbanyal vibes, 1992
	_			•
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adminis	strative proceeding under any enviro	onmental law? Include settlements a	and orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Pai	t 11: Give Details About Your Business or Con	nections to Any Business	OR * 11 for small made	
27.	Within 4 years before you filed for bankruptcy, o  ☐ A sole proprietor or self-employed in a t ☐ A member of a limited liability company ☐ A partner in a partnership ☐ An officer, director, or managing execut ☐ An owner of at least 5% of the voting or	rade, profession, or other activity, e (LLC) or limited liability partnership ive of a corporation	ither full-time or part-time	business?
	■ No. None of the above applies. Go to Part	12.		
	☐ Yes. Check all that apply above and fill in the	he details below for each business.		
	Address	scribe the nature of the business me of accountant or bookkeeper	Employer Identification number Do not include Social Security in Dates business existed	
28	Within 2 years before you filed for bankruptcy, o	did you give a financial statement to		ido all financial
AU.	institutions, creditors, or other parties.	nd you give a illiancial statement to	anyone about your business: more	ue an imanciai
	■ No □ Yes. Fill in the details below.			
	Name Dat Address (Number, Street, City, State and ZIP Code)	te Issued		
Par	112: Sign Below		ĸ	
are t	re read the answers on this Statement of Financi rue and correct. I understand that making a false a bankruptcy case can result in fines up to \$250 S.C. §§ 152, 1341, 1519, and 3571.	e statement, concealing property, or	obtaining money or property by fra	
Jer Sig	inifer Lyhn Swiggum pature of Debtor 1	Signature of Debtor 2		· ,
Dat	4.18.16	Date		

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Debtor 1 Jennifer Lynn Swiggum

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Debtor 1 Jenn	ifer Lynn Swiggum	Case number (if known)	
	प्रकार करिया । प्रकार करिया		e des plates.
property	9,000 miles	☐ Retain the property and [explain]:	
securing debt:	Decent shape		-
Part 2: List Yo	our Unexpired Personal Property Leases		
in the informatio	n below. Do not list real estate leases. U	I in Schedule G: Executory Contracts and Unexpired nexpired leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p)(2	lease period has not yet ended.
Describe your u	nexpired personal property leases		Will the lease be assumed?
Lessor's name:	Roberta Osland		□ No
			■ Yes
Description of lea Property:	sed Written residential lease		
Part 3: Sign B	elow		AAAFAIV
	perjury, I declare that I have indicated mubject to an unexpired(lease.	ny intention about any property of my estate that sec	ures a debt and any personal
Jennifer L Signature of	Muhu Julyu ynn Siviggum Debtor 1	X Signature of Debtor 2	
Date	4-18-16	Date	

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Debto	1 Jennifer Lynn Swiggum			Case numbe	r (if known)			
				Column A Debtor 1		Column B Debtor 2 o non-filing		
8.	Unemployment compensation			\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amount received the Social Security Act. Instead, list it here:	d was a benefit	under				-	
	For you\$	0.0	0_					
	For your spouse \$	0.0	0					
9.	Pension or retirement income. Do not include any amount recibenefit under the Social Security Act.	eived that was	а	\$	0.00	\$	0.00	
10.	Income from all other sources not listed above. Specify the solution to not include any benefits received under the Social Security A received as a victim of a war crime, a crime against humanity, of domestic terrorism. If necessary, list other sources on a separate total below.	Act or payments r international o	s er					
			_	\$	0.00	\$	0.00	
				\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
11.	Calculate your total current monthly income. Add lines 2 throeach column. Then add the total for Column A to the total for Co	ough 10 for olumn B.	\$	1,447.06	+ \$	132.58	= \$	4,579.64
		Į.			ــــا ا			urrent monthly
Part	2: Determine Whether the Means Test Applies to You						income	1
Fall	Determine Whether the wears test Applies to Tou							···········
12.	Calculate your current monthly income for the year. Follow t	hese steps:					r	
	12a. Copy your total current monthly income from line 11			Сор	y line 11 l	nere=>	\$	4,579.64
	Multiply by 12 (the number of months in a year)						<u>x 1</u>	
	12b. The result is your annual income for this part of the form					12b	). \$ <del>\$</del>	54,955.68
13.	Calculate the median family income that applies to you. Follow	ow these steps	:					
	Fill in the state in which you live.	IL .						
	Fill in the number of people in your household.	2						
	Fill in the median family income for your state and size of housel To find a list of applicable median income amounts, go online us for this form. This list may also be available at the bankruptcy cle	ing the link spe	ecified i	n the separa	ate instruc	13. tions	\$	53,896.00
14.	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. On the top Go to Part 3.	of page 1, che	ck box	1, There is i	no presum	ption of abus	e.	
	14b.  Line 12b is more than line 13. On the top of page 1, Go to Part 3 and fill out Form 122A-2.	, check box 2,	The pre	sumption of	abuse is	determined b	y Form 12	2A-2.
Part	3: Sign Below							
	By signing here, I declare under penalty of perjury that the	information on	this sta	tement and	in any atta	chments is t	rue and co	rrect.
	Jennifer Lynn Swiggum	11		ŕ				
	Signature of Debtor 1  Date Od-19-16							
	MM / DD / YYYY							
	If you checked line 14a, do NOT fill out or file Form 122A-2							
	If you checked line 14b, fill out Form 122A-2 and file it with	this form.						

Official Form 122A-1

Case 16-81055 Doc 1 Filed 04/28/16 Entered 04/28/16 11:34:23 Desc Main Document Page 13 of 66 Debtor 1 Jennifer Lynn Swiggum Case number (if known) 41 41a. Fill in the amount of your total nonpriority unsecured debt. If you filled out A Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form. 41a. \$ 25 Copy 41b. 25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i)(l) here=> Multiply line 41a by 0.25..... 42. Determine whether the income you have left over after subtracting all allowed deductions is enough to pay 25% of your unsecured, nonpriority debt. Check the box that applies: Line 39d is less than line 41b. On the top of page 1 of this form, check box 1, There is no presumption of abuse. Go to Part 5. ☐ Line 39d is equal to or more than line 41b. On the top of page 1 of this form, check box 2, There is a presumption of abuse. You may fill out Part 4 if you claim special circumstances. Then go to Part 5. Part 4: Give Details About Special Circumstances 43. Do you have any special circumstances that justify additional expenses or adjustments of current monthly income for which there is no reasonable alternative? 11 U.S.C. § 707(b)(2)(B). ☐ No. Go to Part 5. Yes, Fill in the following information. All figures should reflect your average monthly expense or income adjustment for each item. You may include expenses you listed in line 25. You must give a detailed explanation of the special circumstances that make the expenses or income adjustments necessary and reasonable. You must also give your case trustee documentation of your actual expenses or income adjustments. Give a detailed explanation of the special circumstances Average monthly expense or income adjustment 401k loan repayment Part 5: Sign Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

Official Form 122A-2

a 552 ...

Jennifer Lynn Swiggum Signature of Deptor 1 Case 16-81055 Doc 1 Filed 04/28/16 Entered 04/28/16 11:34:23 Desc Main Document Page 14 of 66

## United States Bankruptcy Court Northern District of Illinois

		1 Of their District of Immon		
In re	Jennifer Lynn Swiggum		Case No.	
		Debtor(s)	Chapter	7
	VEI	RIFICATION OF CREDITOR M	ATRIX	
		Number of	Creditors:	40
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credit	ors is true and	correct to the best of my
Date:	4.18.16	Jennifer Lynn Swiggum Signature of Debtor	y Ju	

of the

Case 16-81055 Doc 1 Filed 04/28/16 Entered 04/28/16 11:34:23 Desc Main

Page 15 of 66 Document Fill in this information to identify your case: Debtor 1 Jennifer Lynn Swiggum Middle Name Last Name Debtor 2 First Name Middle Name Last Name (Spouse if, filing) NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known)

☐ Check if this is an amended filing

12/15

### Official Form 106Sum

## **Summary of Your Assets and Liabilities and Certain Statistical Information**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		assets of what you own
Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	80,000.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$	75,000.00
1c. Copy line 63, Total of all property on Schedule A/B	\$	155,000.00
rt 2: Summarize Your Liabilities		
		iabilities nt you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	86,164.13
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	43,701.80
Your total liabilities	\$	129,865.93
rt 3: Summarize Your Income and Expenses		
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,117.80
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,963.63
rt 4: Answer These Questions for Administrative and Statistical Records		
Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
■ Yes What kind of debt do you have?		
r	1a. Copy line 55, Total real estate, from Schedule A/B	1a. Copy line 55, Total real estate, from Schedule A/B

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Filed 04/28/16 Entered 04/28/16 11:34:23 Desc Main Case 16-81055 Doc 1 Document

Page 16 of 66 Case number (if known) Debtor 1 Jennifer Lynn Swiggum

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

4,579.64 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	ıim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

(	Jase 16-8105	5 DOC 1		04/28/16 cument	Entered 04/2 Page 17 of 66		11:34	:23 Des	SC I	viain
Fill in this info	ormation to identify	your case and th				J				
Debtor 1	Jennifer Lyr	n Swiggum								
	First Name		e Name		Last Name					
Debtor 2 Spouse, if filing)	First Name	Middle	e Name		Last Name					
Inited States	Bankruptcy Court for	the: NORTHER	N DIST	RICT OF ILLIN	NOIS					
Case number					_					Check if this is ar amended filing
Schedun each category	Be as complete and	coperty escribe items. List	le. If two	married people	n asset fits in more that are filing together, bo e top of any additional	th are e	qually resp	onsible for su	pplyii	ng correct
□ No. Go to F		uitable interest in a	any resid	lence, building,	land, or similar proper	rty?				
1.1			What	t is the property	? Check all that apply					
515 Woodrow Street Street address, if available, or other description		Duplex or multi-unit building the am				the amoun	ot deduct secured claims or exemptions. Put mount of any secured claims on <i>Schedule D:</i> itors Who Have Claims Secured by Property.			
Rockfor	rd IL State	61101-4962 ZIP Code		Land	or mobile home		entire pro	alue of the perty?		rent value of the tion you own? \$55,000.00
			U Who	Other	in the property? Check	000	(such as f			wnership interest by the entireties, or
				Debtor 1 only	3 p porty : Oriock	. 3110	Fee sim	•		
Winneb	ago			Debtor 2 only		-				
County			□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community pro					ty property		
			Othe		ou wish to add about th		,	,		

Case 16-81055 Doc 1 Filed 04/28/16 Entered 04/28/16 11:34:23 Desc Main Page 18 of 66
Case number (if known) Document Debtor 1 Jennifer Lynn Swiggum If you own or have more than one, list here: 1.2 What is the property? Check all that apply 4135 Compton Avenue Single-family home Do not deduct secured claims or exemptions. Put Street address, if available, or other description the amount of any secured claims on Schedule D: Duplex or multi-unit building Creditors Who Have Claims Secured by Property. Condominium or cooperative Manufactured or mobile home П Current value of the Current value of the Rockford IL 61101-0000 □ Land entire property? portion you own? \$25,000.00 \$25,000.00 Investment property City State ZIP Code Timeshare Describe the nature of your ownership interest □ Other (such as fee simple, tenancy by the entireties, or a life estate), if known. Who has an interest in the property? Check one Fee simple Debtor 1 only Winnebago Debtor 2 only County Debtor 1 and Debtor 2 only Check if this is community property At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for \$80,000.00 pages you have attached for Part 1. Write that number here..... Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No Yes Do not deduct secured claims or exemptions. Put Mitsubishi 3 1 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **Outlander Sport** Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2014 Year: Debtor 2 only Current value of the Current value of the 9.000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another **Decent shape** \$18,500.00 \$18,500.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Chevrolet 3.2 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Silverado Model Debtor 1 only Creditors Who Have Claims Secured by Property.

Official Form 106A/B Schedule A/B: Property page 2

Debtor 2 only

(see instructions)

Debtor 1 and Debtor 2 only

At least one of the debtors and another

☐ Check if this is community property

100,000

1999

Approximate mileage:

Other information:

Heavy rust

Year:

\$3,000.00

Current value of the

portion you own?

Current value of the

\$3,000.00

entire property?

Dahtand			red 04/28/16 11:34 19 of 66		c Main
Debtor 1	Jennifer Lynn Swiggum		Case number (ii	known)	
3.3 Make Mode Year:	sl: Silverado	Who has an interest in the property?  ☐ Debtor 1 only ☐ Debtor 2 only	the amou Creditors	int of any secured of Who Have Claims	ms or exemptions. Put claims on <i>Schedule D:</i> s <i>Secured by Property.</i>
	oximate mileage: 121,00	<del></del> -	Current v entire pr		Current value of the portion you own?
Other	information:	At least one of the debtors and ano	other		
	vy usage/paint truck, poor		d	240 000 00	¢40,000,00
cond	dition	Check if this is community proper (see instructions)	erty	\$10,000.00	\$10,000.00
		's and other recreational vehicles, othe al watercraft, fishing vessels, snowmobiles		:s	
		u own for all of your entries from Part 2 rite that number here			\$31,500.00
Part 3: Des	cribe Your Personal and Househ	old Items			
Do you ow	n or have any legal or equitab	le interest in any of the following items	?	<b>po</b> Do	ortion you own? o not deduct secured aims or exemptions.
□ No ■ Yes.	room set wi	st in 2 bedroom sets, 2 pit groups, th 4 chairs, wicker patio set, glass and chairs, 3 piece kitchen set		-	\$2,500.00
□ No	es: Televisions and radios; audio including cell phones, camer.  Describe  Joint intere	, video, stereo, and digital equipment; cor as, media players, games st in 2 refrigrators, chest freezer, s aptops, rented LG pads		music collection	s; electronic devices \$500.00
Example  No	oles of value as: Antiques and figurines; painti other collections, memorabili Describe	ngs, prints, or other artwork; books, pictur a, collectibles	es, or other art objects; stan	າp, coin, or base	ball card collections;
	ent for sports and hobbies es: Sports, photographic, exercis musical instruments	e, and other hobby equipment; bicycles, p	pool tables, golf clubs, skis;	canoes and kaya	aks; carpentry tools;
■ No □ Yes.	Describe				

Debtor 1	Case 16-810  Jennifer Lynn S		Filed 04/28/16 Document	Entered 04/28/16 11:34:23 Page 20 of 66 Case number (if known)	Desc Main
11. Clothes  Examp	s oles: Everyday clothe		ts, designer wear, shoes		
■ Yes.	Describe	eryday clothes			\$300.00
■ No		y, costume jewelry,	engagement rings, wed	ding rings, heirloom jewelry, watches, gems, o	gold, silver
□ No	rm animals oles: Dogs, cats, birds Describe	s, horses			
	1	dog, 2 cats			\$15.00
15. Add t for Pa	art 3. Write that num	Il of your entries for the second sec	rom Part 3, including a		\$3,315.00  Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No			rour home, in a safe dep	osit box, and on hand when you file your petiti	on
				Cash	\$5.00
Examp □ No			al accounts; certificates occunts with the same ins	,	nouses, and other similar
	1	7.1. Checking	Associate	ed Bank	\$5.00
	1	7.2. Checking	PARDA C	Credit Union	\$50.00
	1	7.3. Savings	PARDA (	Credit Union	\$25.00

_		Case 16-810		Filed 04/28/16 Document	Entered 04/28/16 11:34:23 Page 21 of 66	Desc Main
D	ebtor 1	Jennifer Lynn S	wiggum		Case number (if known)	
18	Examp  ■ No	mutual funds, or pu les: Bond funds, inve		ith brokerage firms, mor	ey market accounts	
19	joint ve ■ No				orporated businesses, including an interes	t in an LLC, partnership, and
			Name of entity:		% of ownership:	
20	Negotia Non-ne ■ No	able instruments inclu	ude personal check are those you canr		egotiable instruments missory notes, and money orders. by signing or delivering them.	
21		ent or pension accordes: Interests in IRA,		(k), 403(b), thrift saving	s accounts, or other pension or profit-sharing	plans
	Yes. I	ist each account sep. T	parately. ype of account:	Institution n	ame:	
		4	01(k)	Fidelity		\$40,000.00
22	Your sh		posits you have ma		tinue service or use from a company etric, gas, water), telecommunications compar	nies, or others
	_			Institution n	ame or individual:	
23	Annuiti	es (A contract for a p	periodic payment of	money to you, either for	life or for a number of years)	
	☐ Yes	lssuer	name and descripti	on.		
24		s in an education IR C. §§ 530(b)(1), 529A		n a qualified ABLE pro	gram, or under a qualified state tuition pro	ogram.
	☐ Yes	Institut	ion name and desc	ription. Separately file th	ne records of any interests.11 U.S.C. § 521(c):	
25	Trusts,	equitable or future	interests in prope	rty (other than anythin	g listed in line 1), and rights or powers exe	ercisable for your benefit
	☐ Yes.	Give specific informa	tion about them			
26				ts, and other intellecturoceeds from royalties a	nal property nd licensing agreements	
		Give specific informa	tion about them			
27		es, franchises, and des: Building permits,			n holdings, liquor licenses, professional licens	es

 $\hfill \square$  Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured

claims or exemptions.

Debtor 1		DC 1 Filed 04/28/16 Document	Page 22 of 66	Desc Main
28 <b>Tax r</b>				
□ No				
Debtor 1				
		2015 tax refund expecta	ncy Federal	\$100.00
Exar ■ No	mples: Past due or lump sum alimo	ny, spousal support, child supp	ort, maintenance, divorce settlement, propert	y settlement
Exar _	mples: Unpaid wages, disability inso benefits; unpaid loans you n		nefits, sick pay, vacation pay, workers՝ compe	ensation, Social Security
_Exar	<i>mpl</i> es: Health, disability, or life insu	rance; health savings account (	HSA); credit, homeowner's, or renter's insura	ance
■ Yes				
	Company	name:	Beneficiary:	Surrender or refund value:
	Employe	r sponsored term policy	Husband	\$0.00
If you	u are the beneficiary of a living trus			ceive property because
☐ Yes  33. <b>Claim</b> <i>Exar</i>	s. Give specific information  ns against third parties, whether  mples: Accidents, employment disp			
☐ Yes  33. Claim  Exar  No	s. Give specific information  ns against third parties, whether  mples: Accidents, employment disp			
☐ Yes  33. Claim Exar ■ No ☐ Yes  34. Other	s. Give specific information  ns against third parties, whether  mples: Accidents, employment disp s. Describe each claim r contingent and unliquidated cla	utes, insurance claims, or rights	s to sue	o set off claims
☐ Yes  33. Claim Exar ■ No ☐ Yes  34. Other ■ No	s. Give specific information  ns against third parties, whether  mples: Accidents, employment disp s. Describe each claim r contingent and unliquidated cla	utes, insurance claims, or rights	s to sue	o set off claims
☐ Yes  33. Claim Exar ■ No ☐ Yes  34. Other ■ No ☐ Yes	s. Give specific information  ns against third parties, whether mples: Accidents, employment disp s. Describe each claim r contingent and unliquidated cla	utes, insurance claims, or rights	s to sue	o set off claims
☐ Yes  33. Claim Exam No ☐ Yes  34. Other ■ No ☐ Yes  35. Any f	s. Give specific information  ns against third parties, whether mples: Accidents, employment disp s. Describe each claim r contingent and unliquidated class. Describe each claim	utes, insurance claims, or rights	s to sue	o set off claims
☐ Yes  33. Claim Exam No ☐ Yes  34. Other ☐ No ☐ Yes  35. Any f ☐ No ☐ Yes  36. Add	s. Give specific information  Ins against third parties, whether imples: Accidents, employment disples. Describe each claim  In contingent and unliquidated claim	utes, insurance claims, or rights aims of every nature, includin ady list	s to sue  ng counterclaims of the debtor and rights t	so set off claims
☐ Yes  33. Claim  Exar  No ☐ Yes  34. Other  No ☐ Yes  35. Any f  No ☐ Yes  36. Add  for f	s. Give specific information  Ins against third parties, whether imples: Accidents, employment disples. Describe each claim  In contingent and unliquidated claim	utes, insurance claims, or rights aims of every nature, includin ady list	ny entries for pages you have attached	
☐ Yes  33. Claim Exar ■ No ☐ Yes  34. Other ■ No ☐ Yes  35. Any f ■ No ☐ Yes  36. Add for f	ns against third parties, whether mples: Accidents, employment disp s. Describe each claim r contingent and unliquidated class. Describe each claim financial assets you did not alreads. Give specific information d the dollar value of all of your er Part 4. Write that number here	utes, insurance claims, or rights aims of every nature, includin ady list atries from Part 4, including a	ny entries for pages you have attached	
☐ Yes  33. Claim Exar ☐ No ☐ Yes  34. Other ☐ No ☐ Yes  35. Any f ☐ No ☐ Yes  36. Add for f	ns against third parties, whether mples: Accidents, employment disp s. Describe each claim r contingent and unliquidated class. Describe each claim financial assets you did not alreads. Give specific information d the dollar value of all of your er Part 4. Write that number here	utes, insurance claims, or rights aims of every nature, includin ady list atries from Part 4, including a	ny entries for pages you have attached	

		Case 16-81055	Doc 1	Filed 04/28/16		4/28/16 11:34:23	Desc Main
Debt	tor 1	Jennifer Lynn Swigg	ıım	Document	Page 23 of	66 Case number (if known)	
Part		scribe Any Farm- and Commo	ercial Fishing-		n or Have an Interes	st In.	
	_ ′	I own or have any legal or Go to Part 7.	equitable in	nterest in any farm- or o	commercial fishin	g-related property?	
	_	Go to Part 7.  Go to line 47.					
Part	7:	Describe All Property You	Own or Have a	an Interest in That You Dic	Not List Above		
<b>■</b> □ 54.	Examp No Yes.	u have other property of a ples: Season tickets, country Give specific information	y club membe	ership	umber here		\$0.00
Part	8:	List the Totals of Each Part	of this Form				
55.	Part 1	1: Total real estate, line 2					\$80,000.00
		2: Total vehicles, line 5			\$31,500.00		
57.	Part 3	3: Total personal and hou	sehold items	s, line 15	\$3,315.00		
58.	Part 4	4: Total financial assets, li	ine 36		\$40,185.00		
		5: Total business-related			\$0.00		
		6: Total farm- and fishing-			\$0.00		
61.	Part 7	7: Total other property no	t listed, line	54 +	\$0.00		
62.	Total	personal property. Add lir	nes 56 throug	h 61	\$75,000.00	Copy personal property to	otal <b>\$75,000.00</b>

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$155,000.00

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Fill in this inform	nation to identify your	case:		
Debtor 1	Jennifer Lynn Sw	riggum		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exem	ptions are	you claiming?	Check one only	, even if	your spouse is	filing with	vou.
----	-------------------	------------	---------------	----------------	-----------	----------------	-------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property	current value of the portion you own  Copy the value from		eck only one box for each exemption.	Specific laws that allow exemption
515 Woodrow Street Rockford, IL 61101-4962 Winnebago County	\$55,000.00	•	\$15,000.00	735 ILCS 5/12-901
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
2009 Chevrolet Silverado 121,000 miles	\$10,000.00		\$2,400.00	735 ILCS 5/12-1001(c)
Heavy usage/paint truck, poor condition Line from Schedule A/B: 3.3			100% of fair market value, up to any applicable statutory limit	
2009 Chevrolet Silverado 121,000 miles	\$10,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
Heavy usage/paint truck, poor condition Line from Schedule A/B: 3.3			100% of fair market value, up to any applicable statutory limit	
Joint interest in 2 bedroom sets, 2 pit groups, 4 recliners, dining room set	\$2,500.00		\$2,500.00	735 ILCS 5/12-1001(b)
with 4 chairs, wicker patio set, glass table with chairs, bistro tabel and chairs, 3 piece kitchen set Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	

Case 16-81055 Doc 1 Filed 04/28/16 Entered 04/28/16 11:34:23 Desc Main Document Page 25 of 66 Debtor 1 Jennifer Lynn Swiggum Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Joint interest in 2 refrigrators, chest 735 ILCS 5/12-1001(b) \$500.00 \$500.00 freezer, stove, 3 TVs, 3 DVD players, 2 laptops, rented LG pads 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 7.1 **Everyday clothes** 735 ILCS 5/12-1001(a) \$300.00 \$300.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit 401(k): Fidelity 735 ILCS 5/12-1006 \$40,000.00 \$40,000.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit 35 ILCS 5/12-1001(f)

	Employer sponsored term policy Beneficiary: Husband	\$0.00		\$0.00	7:
	Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			led on or after the date of adjustmen	t.)
	<ul><li>No</li><li>☐ Yes. Did you acquire the property covered</li></ul>	ad by the exemption w	ithin 1	215 days before you filed this sees?	)
	□ No	ed by the exemption wi	101111111	,213 days before you filed this case?	
	☐ Yes				

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		Document	Page 26	3 of 66		
Fill	in this information to identify	your case:				
Deh	otor 1 Jennifer Lyn	n Swiggum				
DCD	First Name	Middle Name	Last Name		-	
Deb	otor 2					
(Spot	use if, filing) First Name	Middle Name	Last Name		-	
Llnit	ed States Bankruptcy Court for	the: NORTHERN DISTRICT OF ILL	INOIS			
Offic	led States Bankruptcy Court for	the. NorthEld Blottlot of IEE			-	
Cas	e number					
(if kno	own)				☐ Check	if this is an
					amend	led filing
Off	icial Form 106D					
Sc	hedule D: Credito	ors Who Have Claims	Secure	d by Propert	V	12/15
_					<u> </u>	
		ble. If two married people are filing togeth ill it out, number the entries, and attach it				
	per (if known).	in it out, number the entries, and attach it	to this form. O	in the top of any addition	mai pages, write your na	ille allu case
1. Do	any creditors have claims secure	ed by your property?				
	•	mit this form to the court with your other	schedules V	ou have nothing else t	to report on this form	
			Scriculics. 1	ou have nothing clac	to report on this form.	
	Yes. Fill in all of the informat	tion below.				
Par	List All Secured Claims	3				
2. Li	st all secured claims. If a creditor	has more than one secured claim, list the cre	ditor separately	, Column A	Column B	Column C
for e	ach claim. If more than one creditor	r has a particular claim, list the other creditor	s in Part 2. As	Amount of claim	Value of collateral	Unsecured
muc	h as possible, list the claims in alpha	abetical order according to the creditor's nam	e.	Do not deduct the value of collateral.	that supports this claim	portion If any
~ 4	Associated Loan			·		
2.1	Services Department	Describe the property that secures	he claim:	\$40,479.73	\$55,000.00	\$0.00
	Creditor's Name	515 Woodrow Street Rockfo	rd, IL			
		61101-4962 Winnebago Cou	ınty			
	PO Box 8879	As of the date you file, the claim is:	Check all that			
	Carol Stream, IL	apply.	Oneck all that			
	60197-8879	Contingent				
	Number, Street, City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who	o owes the debt? Check one.	Nature of lien. Check all that apply.				
	Debtor 1 only	■ An agreement you made (such as	mortgage or sec	cured		
	Debtor 2 only	car loan)				
	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
	At least one of the debtors and anoth	ner				
	Check if this claim relates to a	☐ Other (including a right to offset)				
	community debt					
Date	e debt was incurred 2013	Last 4 digits of account num	ber 2615			
	2010		2010			
	Associated Loop					
2.2	Associated Loan Services Department	Describe the property that secures	the claim:	\$23,512.36	\$25,000.00	\$0.00
	Creditor's Name	4135 Compton Avenue Rock				
		61101 Winnebago County	dord, IL			
	PO Box 8879					
	Carol Stream, IL	As of the date you file, the claim is: apply.	Check all that			
	60197-8879	Contingent				
	Number, Street, City, State & Zip Code	Unliquidated				
	rambol, chook only, chaic a zip coac	☐ Disputed				
Who	o owes the debt? Check one.	Nature of lien. Check all that apply.				
_	Debtor 1 only	An agreement you made (such as	mortagae er cer	cured		
_	Debtor 2 only	car loan)	nongaye or sec	Juigu		
	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
	At least one of the debtors and anoth		ai 110 0 11011)			
_	Check if this claim relates to a	Other (including a right to offset)				
_ `		— • (moraamig a night to onset)				

community debt

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Debtor 1 <b>Jennifer Lynn Swiggum</b>		Case number (if know)		
First Name Middle N	lame Last Name			
Date debt was incurred 2002	Last 4 digits of account number 8082			
2.3 PARDA Credit Union	Describe the property that secures the claim:	\$22,172.04	\$18,500.00	\$3,672.04
5500 Forest Hills Road Loves Park, IL 61111	2014 Mitsubishi Outlander Sport 9,000 miles Decent shape As of the date you file, the claim is: Check all that apply.  Contingent			
Number, Street, City, State & Zip Code  Who owes the debt? Check one.	☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or secucar loan)	ured		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)			
Date debt was incurred September 4, 2014	Last 4 digits of account number 3L01			
-	Column A on this page. Write that number here:	\$86,164.13	]	
If this is the last page of your form, add Write that number here:	the dollar value totals from all pages.	\$86,164.13		

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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			Document	Page 2	28 of 66		
Fill	l in this inforr	nation to identify your	case:				
De	btor 1	Jennifer Lynn Sw	viagum				
		First Name	Middle Name	Last Name		-	
	btor 2					_	
(Spo	ouse if, filing)	First Name	Middle Name	Last Name			
Un	ited States Ba	nkruptcy Court for the:	NORTHERN DISTRICT OF	FILLINOIS			
_						-	
	se number _ nown)						Chook if this is an
(	nowny					_	Check if this is an amended filing
							amondod ming
)f	ficial Forn	n 106E/F					
3c	hedule E	F: Creditors W	/ho Have Unsecure	ed Claims			12/15
ny Sch Sch eft.	executory cont edule G: Execu edule D: Credit Attach the Con le and case nur	racts or unexpired leases tory Contracts and Unexp ors Who Have Claims Sec tinuation Page to this pa nber (if known).	se Part 1 for creditors with PRIC that could result in a claim. Al bired Leases (Official Form 1060 cured by Property. If more space ge. If you have no information to	so list executory 3). Do not include e is needed, copy	or contracts on Schedule A e any creditors with partia y the Part you need, fill it o	/B: Property (Offic ally secured claims out, number the er	ial Form 106A/B) and on s that are listed in atries in the boxes on the
Pa	rt 1: List A	II of Your PRIORITY U	nsecured Claims				
1.	Do any credito	ors have priority unsecure	ed claims against you?				
	No. Go to P	art 2.					
	☐ Yes.						
Pa	rt 2: List A	II of Your NONPRIORIT	ΓY Unsecured Claims				
3.	Do any credito	ors have nonpriority unse	cured claims against you?				
	□ No. You ha	ve nothing to report in this p	part. Submit this form to the court	with your other sch	hedules.		
	_			•			
	Yes.						
4.	unsecured clair	m, list the creditor separate	laims in the alphabetical order of ly for each claim. For each claim li list the other creditors in Part 3.If y	sted, identify what	t type of claim it is. Do not li	ist claims already in	cluded in Part 1. If more
							Total claim
4.1	Accoun	t Assure	Last 4 digits of	account number	7110		\$205.04
		y Creditor's Name					<del></del>
		Iministrator	When was the	debt incurred?			_
	PO Box	: 219 I, GA 30077-0219					
		treet City State Zlp Code	As of the date y	ou file, the claim	n is: Check all that apply		
	Who incu	rred the debt? Check one.			,		
	Debtor	1 only	☐ Contingent				
	☐ Debtor	2 only	☐ Unliquidated				
	_	1 and Debtor 2 only	☐ Disputed				
		t one of the debtors and an	•	RIORITY unsecure	ed claim:		
		if this claim is for a com	_	S			
	debt			arising out of a sep	paration agreement or divor	ce that you did not	
	Is the clai	m subject to offset?	report as priority	claims			
	■ No		•	•	ring plans, and other similar	debts	
	☐ Yes		Other. Speci	fy Gordman's	s credit card		
			·				_

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Debtor 1 Jennifer Lynn Swiggum Case number (if know) 4.2 \$2,557.27 Capital One Retail Services Last 4 digits of account number 8831 Nonpriority Creditor's Name PO Box 71106 When was the debt incurred? Charlotte, NC 28272-1106 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit card ☐ Yes 4.3 **Cardmember Service** Last 4 digits of account number 9230 \$2,614.58 Nonpriority Creditor's Name PO Box 790408 When was the debt incurred? Saint Louis. MO 63179-0408 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Credit card Other. Specify 4.4 Discover Last 4 digits of account number 6100 \$10,634.53 Nonpriority Creditor's Name P.O. Box 6103 When was the debt incurred? Carol Stream, IL 60197-6103 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit card

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Debtor 1 Jennifer Lynn Swiggum Case number (if know) 4.5 \$929.81 Dr. Paul A. Galluzzo Last 4 digits of account number Nonpriority Creditor's Name 6999 Redansa Drive When was the debt incurred? Rockford, IL 61108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.6 **GI Pathology** Last 4 digits of account number 3414 \$81.29 Nonpriority Creditor's Name PO Box 1000 When was the debt incurred? Dept. 46 Memphis, TN 38148-0001 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical bills ☐ Yes 4.7 Kohl's 5097 \$413.32 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 2983 Milwaukee, WI 53201-2983 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit card ☐ Yes

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Jennifer Lynn Swiggum	Case number (if know)	
Lowes/Syncrony Bank	Last 4 digits of account number 6450	\$3,027.47
Nonpriority Creditor's Name PO Box 530914	When was the debt incurred?	
Atlanta, GA 30353-0914		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	-	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  ☐ Student loans	
Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Credit card	
Mutual Management Services	Last 4 digits of account number	\$2,483.18
Nonpriority Creditor's Name 7177 Crimson Ridge Drive P.O. Box 8740	When was the debt incurred?	
Rockford, IL 61126-6235  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
_	П	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt sthe claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Collector for Swedish American Hospital and Others	
PARDA Credit Union		<b>*</b> 5.040.00
Nonpriority Creditor's Name	Last 4 digits of account number 0002	\$5,012.86
5500 Forest Hills Road	When was the debt incurred?	
Loves Park, IL 61111		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset? ■	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Line of Credit	

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Debtor 1 Jennifer Lynn Swiggum 4.1 PayPal Credit 1615 \$699.62 Last 4 digits of account number Nonpriority Creditor's Name PO Box 105658 When was the debt incurred? Atlanta, GA 30348-5658 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit card 4.1 **Rockford Associated Pathologists** 7666 \$20.61 Last 4 digits of account number Nonpriority Creditor's Name PO Box 15785 When was the debt incurred? Rockford, IL 61112-5785 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical bills ☐ Yes 4.1 Rockford Gastroenterology Assoc. 6489 \$464.75 Last 4 digits of account number Nonpriority Creditor's Name 401 Roxbury Road When was the debt incurred? Rockford, IL 61107 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Medical bills

Other. Specify

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Debtor 1 Jennifer Lynn Swiggum Case number (if know) 4.1 **Rockford Health Medical Lab** 5186 \$79.25 Last 4 digits of account number 4 Nonpriority Creditor's Name P.O. Box 138 When was the debt incurred? Rockford, IL 61105 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical bills ☐ Yes 4.1 **Rockford Health Physicians** A395 \$126.35 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Department 4701 Carol Stream, IL 60122-4701 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical bills ☐ Yes 4.1 **Rockford Memorial Hospital** 6091 \$1.958.18 Last 4 digits of account number 6 Nonpriority Creditor's Name Dept. 4628 When was the debt incurred? Carol Stream, IL 60122-4628 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

Other. Specify

Medical bills

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Document Page 34 of 66 Case number (if know) Debtor 1 Jennifer Lynn Swiggum 4.1 Rockford Radiology Assoc. 1499 \$79.37 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 1790 When was the debt incurred? Brookfield, WI 53008-1790 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical bills ☐ Yes 4.1 **Sears Credit Cards** 0522 \$1,458.52 Last 4 digits of account number 8 Nonpriority Creditor's Name When was the debt incurred? PO Box 78051 Phoenix, AZ 85062-8051 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Other. Specify Credit card ☐ Yes 4.1 Sprint 6565 \$2,441,77 9 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 4191 When was the debt incurred? Carol Stream, IL 60197-4191 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

Other. Specify

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

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Swedish American Hospital	Last 4 digits of account number 6556	\$24
Nonpriority Creditor's Name PO Box 310283	When was the debt incurred?	
Des Moines, IA 50331-0283	when was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	□ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Medical bills	
Synchrony Bank	Last 4 digits of account number 4665	\$4,2°
Nonpriority Creditor's Name		¥ ·,=
PO Box 9600061	When was the debt incurred?	
Orlando, FL 32896-0061	As of the date was file the claim in O	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only		
_	Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
ls the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Credit card	
Synchrony Bank	Last 4 digits of account number 8532	\$57
Nonpriority Creditor's Name	Last 4 digits of account number 8532	ΨΟ
PO Box 9600061	When was the debt incurred?	
Orlando, FL 32896-0061	<u> </u>	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	П	
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  ☐ Student loans	
☐ Check if this claim is for a community debt		
gept Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	

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U.S. Cellular	Last 4 digits of account number 9770	\$
Nonpriority Creditor's Name Dept. 2025 Palatine, IL 60055-0205	When was the debt incurred?	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify	
University of WI Medical Foundation	Last 4 digits of account number 8213	\$
Nonpriority Creditor's Name P.O. Box 2978 Milwaukee, WI 53201-2978	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical bills	
Walmart/Syncrony Bank	Last 4 digits of account number 6816	\$2.
Nonpriority Creditor's Name PO Box 530927	When was the debt incurred?	
Atlanta, GA 30353-0927  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	Пол	
Debtor 2 only	☐ Contingent ☐ Unliquidated	
Debtor 2 only  Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	

### Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

Case 16-81055 Doc 1  Debtor 1 Jennifer Lynn Swiggum	Filed 04/28/16 Ent Document Page	ered 04/28/16 11:34:23 Desc Main e 37 of 66 Case number (if know)
Capital Management Services, LP 698 1/2 South Odgen Street Buffalo, NY 14206-2317	Line 4.4 of (Check one):  Last 4 digits of account number	□ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Comenity - Gordmans PO Box 659705	On which entry in Part 1 or Part 2 did Line <b>4.1</b> of ( <i>Check one</i> ):	d you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
San Antonio, TX 78265-9705	Last 4 digits of account number	
Name and Address Diversified Adjustment Service, Inc PO Box 32145 Fridley, MN 55432-0145	On which entry in Part 1 or Part 2 did Line <u>4.23</u> of ( <i>Check one</i> ):	d you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address MiraMed Revenue Group Dept. 77304 P.O. Box 77000 Detroit, MI 48277-0304	On which entry in Part 1 or Part 2 did Line 4.15 of (Check one):	d you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Detroit, iii 40277-0304	Last 4 digits of account number	
Name and Address Mutual Management Services 7177 Crimson Ridge Drive P.O. Box 8740	On which entry in Part 1 or Part 2 did Line <b>4.20</b> of ( <i>Check one</i> ):	d you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Rockford, IL 61126-6235	Last 4 digits of account number	
Name and Address Northland Group Inc. P.O. Box 390846	On which entry in Part 1 or Part 2 did Line <u>4.7</u> of ( <i>Check one</i> ):	d you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Minneapolis, MN 55439	Last 4 digits of account number	
Name and Address Northland Group Inc. PO Box 390905 Minneapolis, MN 55439	On which entry in Part 1 or Part 2 did Line 4.18 of (Check one):	d you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Rockford Mercantile 2502 S. Alpine Road Rockford, IL 61108	On which entry in Part 1 or Part 2 dic Line <u>4.12</u> of ( <i>Check one</i> ):	d you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Nockiora, ie orrod	Last 4 digits of account number	
Name and Address Rockford Mercantile 2502 S. Alpine Road Rockford, IL 61108	On which entry in Part 1 or Part 2 did Line 4.16 of ( <i>Check one</i> ):	d you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
ROCKIOIU, IL 01100	Last 4 digits of account number	
Name and Address Rockford Mercantile 2502 S. Alpine Road Rockford, IL 61108	On which entry in Part 1 or Part 2 did Line 4.17 of (Check one):  Last 4 digits of account number	d you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address	On which entry in Part 1 or Part 2 dic	t you list the original creditor?
Name and Addiess State Collection Service, Inc. P.O. Box 6250 Madison, WI 53716-0250	Line 4.24 of (Check one):	Part 2: Creditors with Nonpriority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	

Part 4: Add the Amounts for Each Type of Unsecured Claim

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Debtor 1 Jennifer Lynn Swiggum

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				•	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					<u> </u>
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				-	Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	43,701.80
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	43,701.80

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Fill in this infor	mation to identify your	case:		
Debtor 1	Jennifer Lynn Sw	/iggum		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)		<u> </u>		☐ Check if this is an
				amended filing

### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Roberta Osland
4135 Compton Avenue
Rockford, IL 61101

State what the contract or lease is for

Written residential lease

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		DUGUITIE	III Paue 40 C	1.00	
Fill in this in	nformation to identify your				
Debtor 1	Jennifer Lynn Sw	riggum			
Dahtano	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	) First Name	Middle Name	Last Name		
United State	s Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number	er				
(if known)					eck if this is an ended filing
Official	Form 106H				•
	ıle H: Your Cod	ebtors			12/15
1. Do your name a 1. Do you No Yes 2. Withi Arizona, No. G Yes.	nd case number (if known) ou have any codebtors? (If y n the last 8 years, have you, California, Idaho, Louisiana, Go to line 3. Did your spouse, former spou	Answer every question you are filing a joint case, lived in a community pr Nevada, New Mexico, Pu use, or legal equivalent live ors. Do not include your	do not list either spouse operty state or territor erto Rico, Texas, Washi with you at the time?	<b>y?</b> (Community property states and ten	ritories include
Form 10 out Col	06D), Schedule E/F (Official umn 2.			6G). Use Schedule D, Schedule E/F,	or Schedule G to fill
	olumn 1: Your codebtor ime, Number, Street, City, State and ZI	P Code		Column 2: The creditor to whom Check all schedules that apply:	you owe the debt
	ame umber Street ty	State	ZIP Code	☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line	
3.2 <sub>Na</sub>	ame			Schedule D, line Schedule E/F, line Schedule G, line	
Nu Ci	umber Street ty	State	ZIP Code		

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Fill in this informa	ation to identify your case:	
Debtor 1	Jennifer Lynn Swiggum	
Debtor 2 (Spouse, if filing)		
United States Bar	nkruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS	
Case number		Check if this is:
(If known)		☐ An amended filing
		A supplement showing postpetition chapter 13 income as of the following date:
Official Fo	orm 106l	MM / DD/ YYYY
0 - 1 1 - 1 -	L. Varan Incarana	, 22,

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### **Describe Employment** Fill in your employment **Debtor 1** Debtor 2 or non-filing spouse information. If you have more than one job, Employed Employed **Employment status\*** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation Generalist/PA Self employed painter Include part-time, seasonal, or **Employer's name Mondelez International Loren's Painting** self-employed work. **Employer's address** Occupation may include student 5500 Forest Hills Road 515 Woodrow Street or homemaker, if it applies. Loves Park, IL 61111 Rockford, IL 61101 How long employed there? 12 years 4 years \*See Attachment for Additional Employment Information

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or

non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 5,978.94 0.00 2 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3 0.00 0.00 +\$ 3. Calculate gross Income. Add line 2 + line 3. \$ 5,978.94 0.00

Official Form 106I Schedule I: Your Income page 1

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Debt	tor 1	Jennifer Lynn Swiggum	-	С	ase number (if known)				
					For Debtor 1		or Debtor		
	Cop	y line 4 here	4.		\$ 5,978.94	\$		0.00	_
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$ 1,503.52	\$		0.00	)
	5b.	Mandatory contributions for retirement plans	5b.		\$ 0.00	\$		0.00	_
	5c.	Voluntary contributions for retirement plans	5c.		\$ 352.61	\$		0.00	_
	5d.	Required repayments of retirement fund loans	5d.		\$ 268.88	\$		0.00	
	5e.	Insurance	5e.		\$ 268.71	\$		0.00	
	5f.	Domestic support obligations	5f.		\$0.00	\$		0.00	<u>)                                    </u>
	5g.	Union dues	5g.		\$0.00	\$		0.00	_
	5h.	Other deductions. Specify:	_ 5h.	+	\$0.00	+ \$		0.00	<u></u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$ 2,393.72	\$		0.00	_
7.	Calc	sulate total monthly take-home pay. Subtract line 6 from line 4.	7.	9	\$ 3,585.22	\$		0.00	<u> </u>
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total							
		monthly net income.	8a.		\$ 400.00	\$	i	132.58	}
	8b.	Interest and dividends	8b.		\$ 0.00	\$		0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$ 0.00	\$		0.00	
	8d.	Unemployment compensation	8d.		\$ <u>0.00</u> \$ <u>0.00</u>	\$		0.00	_
	8e.	Social Security	8e.		\$ 0.00	\$		0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:				·			_
	8g.	Pension or retirement income	_ 8g.		\$ 0.00 \$ 0.00	\$ \$		0.00	_
	8h.	Other monthly income Cresifu	8h.		\$ 0.00			0.00	_
	011.	Other monthly income. Specify:	_ 011.		Ψ		·	0.00	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	400.00	\$		132.5	8
10	Calc	culate monthly income. Add line 7 + line 9.	10.	\$	3,985.22 + \$		132.58	= \$	4,117.80
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_	3,963.22 + V		132.30		4,117.00
11.	State Inclu	e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your refriends or relatives.  Not include any amounts already included in lines 2-10 or amounts that are not a	depe				n <i>Schedul</i>	e <i>J</i> . +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The resident amount on the Summary of Schedules and Statistical Summary of Certaines						\$	4,117.80
13.	-	ou expect an increase or decrease within the year after you file this form	?					Combi month	ned ly income
		No. Yes. Explain: Ronuses received in early 2016 from employer at	o no	ıt o	vnected to be no	id a	nain in 2	016	

Official Form 106I Schedule I: Your Income page 2

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Debtor 1 Jenniter Lynn Swiggum Case number (if known)	Debtor 1 J	Jennifer Lynn Swiggum	Case number (if known)	
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## Official Form B 6I Attachment for Additional Employment Information

Debtor		
Occupation		
Name of Employer	Illinois Deprtment of Human Services	
How long employed		
Address of Employer		

Official Form 106I Schedule I: Your Income page 3

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Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    The continuation of the continu	Fill in this infor	mation to identify y	our case:					
Debtor 2   An amended filing   An amended filing   As supplement showing postpetition chapter (15 expenses as of the following date: 15 expenses as of the following date:   MM / DB / YYYY	Debtor 1	Jennifer Lyr	ın Swigg	um		Check	c if this is:	
Case number (It known)    Case number   Case						- /	A supplement show	
Official Form 106J  Schedule J: Your Expenses  Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, statch another sheet to this form. On the top of any additional pages, write your name and case number (if known), Answer every question.  Brit I Describe Your Household  I. Is this a joint case?  No. Go to line 2.  Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.  Do not list Debtor 1 and Yes.  Policy I Describe Your Additional pages, write your name and case number of the page of the pa	United States Ba	ankruptcy Court for the	: NORTH	HERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
Official Form 106J  Schedule J: Your Expenses  Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, statch another sheet to this form. On the top of any additional pages, write your name and case number (if known), Answer every question.  Brit I Describe Your Household  I. Is this a joint case?  No. Go to line 2.  Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.  Do not list Debtor 1 and Yes.  Policy I Describe Your Additional pages, write your name and case number of the page of the pa	Case number							
Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part     Describe Your Household								
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part 1:	Official F	Form 106J						
Information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part 1:	Schedu	le J: Your	<b>Exper</b>	ises				12/1
1. Is this a joint case?  No. Go to line 2.  Yes. Does Debtor 2 live in a separate household?  No  Do you have dependents?  No  Do not list Debtor 1 and Debtor 2.  Do not list Debtor 1 and Debtor 2.  Do not state the dependents names.  Po yes.  Do your expenses include expenses of people other than yourself and your dependents?  The expenses of people other than your dependents?  The limit and your dependents?  Include expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filled. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L)  The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4a. \$  0.00  Dependent's relationship to Dependent's relationsh	information. I	f more space is ne	eded, atta	ch another sheet to this				
No. Go to line 2.  Yes. Does Debtor 2 live in a separate household?  No So to line 2.  Yes. Does Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.  Do you have dependents?  No Do not list Debtor 1 and Debtor 2.  Do not state the dependents names.  Do not state the dependents names.  Do you're expenses include expenses for Separate Household of Debtor 2.  Do you're expenses include expenses of people other than yourself and your dependents?  Yes  No Yes  The restal or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. S 0.00  4d. Home maintenance, repair, and upkeep expenses  4d. S 0.00  And Debtor 2.  Dependent's relationship to Dependent's negative with join of Debtor 1 or Debtor 2.  Dependent's relationship to Dependent's negative with you?  No  Yes  No  Yes  No  Yes  Prest 2:  Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income  (Official Form 106i.)  4. S 399.04			ehold					
Ves. Does Debtor 2 live in a separate household?   No   Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.   Do you have dependents?   No   No   No   No   No   No   Yes.   Part 2:   Estimate Your expenses include expenses of people other than yourself and your dependents?   No   No   Yes   Still out this information for Debtor 1 or Debtor 2   Dependent's relationship to   Dependent's age   No   No   Yes								
No			in a separ	ate household?				
2. Do you have dependents? No Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent		_	·					
Do not list Debtor 1 and Debtor 2.  Do not state the dependents names.  Do your expenses include expenses of people other than yourself and your dependents?  Do your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. \$  0.00  1 No  2 Yes  No  3 Peependent's relationship to Debtor 2  Dependent's relationship to Debtor 2  Dependent's relationship to Debtor 2  Dependent's relationship to Debtor 2  Post 1 or Debtor 2  Dependent's relationship to Debtor 2  Dependent ive with you?  No  Yes  No  No  Yes  No  No  Yes  Dependent's relationship to Debtor 2  Dependent's relationship to Debtor 2  Dependent ive your Pess  No  No  Yes  No  No  Yes  Part 2:  Estimate Your Ongoinent's association of condominium dues  Dependent ive with your Pess  No  No  Yes  No  No  Your expenses  Your expenses  Your expenses  A S D.  O.00  4. \$  Dependent's pess  No  No  Yes  No  No  No  Yes  No  No  No  Yes  No  No  No  Yes  No  No  Your expe		Yes. Debtor 2 mu	st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of Debto	or 2.	
Debtor 2.  Do not state the dependents names.  Debtor 1 or Debtor 2 age live with you?  Do not state the dependents names.  Debtor 1 or Debtor 2 age live with you?  No Yes  No No  Yes  No No  Yes  Satismate Your Ongoing Monthly Expenses  Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. \$ 0.00  Homeowner's association or condominium dues  4d. \$ 0.00  Ono	2. Do you h	ave dependents?	■ No					
dependents names.    Yes   No   No   Yes   Yes   Yes   No   Yes			☐ Yes.					
No   Yes   Yes   No   Yes   Ye								
3. Do your expenses include expenses of people other than yourself and your dependents?  Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. \$ 0.00  4d. Homeowner's association or condominium dues  4d. \$ 0.00	aepenaer	nts names.						
3. Do your expenses include expenses of people other than yourself and your dependents?   Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  4. \$ 399.04  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. \$ 0.00  4d. Homeowner's association or condominium dues  4d. \$ 0.00								
3. Do your expenses include expenses of people other than yourself and your dependents?  Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I</i> : Your Income (Official Form 106L)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. Homeowner's association or condominium dues  4d. Society of the form as a supplement in a Chapter 13 case to report expenses  4d. Society of the form and fill in the association or condominium dues								□ No
3. Do your expenses include expenses of people other than yourself and your dependents?    Part 2:								= :
3. Do your expenses include expenses of people other than yourself and your dependents?  Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. \$  0.00  4c. Home maintenance, repair, and upkeep expenses  4d. \$  0.00  4d. Homeowner's association or condominium dues								
expenses of people other than your dependents?  Part 2: Estimate Your Ongoing Monthly Expenses  Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. \$  0.00  1.	3 Do your	expenses include		No				⊔ Yes
Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.  Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  4. If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. \$  0.00  Homeowner's association or condominium dues	expenses	s of people other t	han					
the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)  4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  4. \$ 399.04  If not included in line 4:  4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 0.00	Estimate your expenses as	expenses as of yof a date after the	our bankr	uptcy filing date unless y				
payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 399.04  4a. \$ 0.00  4b. \$ 70.00  4c. Homeowner's association or condominium dues 4d. \$ 0.00	the value of s	uch assistance an	non-cash d have ind	government assistance i cluded it on <i>Schedule I:</i> )	f you know 'our Income		Your exp	enses
4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance  4c. Home maintenance, repair, and upkeep expenses  4d. Homeowner's association or condominium dues  4d. \$  0.00  70.00  4d. \$  0.00					nclude first mortgag	e 4. \$		399.04
4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$  0.00	If not inc	luded in line 4:						
4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$  0.00	4a. Re	al estate taxes				4a. \$		0.00
4d. Homeowner's association or condominium dues 4d. \$ 0.00			s, or renter	's insurance				
			•					
					mo oquity locate			-

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ebtor 1	Jennifer Lynn Swiggum	Case num	ber (if known)	
. Utilit	ries.			
. 6a.	Electricity, heat, natural gas	6a.	\$	219.00
6b.	Water, sewer, garbage collection	6b.	\$	23.33
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	·	292.00
6d.	Other. Specify: Home Security	6d.		40.00
	d and housekeeping supplies	— 7.	·	
	dand nousekeeping supplies dcare and children's education costs	7. 8.		500.00
_			\$	0.00
	hing, laundry, and dry cleaning	9.	\$	20.00
	onal care products and services	10.	\$	50.00
	ical and dental expenses	11.	\$	300.00
	sportation. Include gas, maintenance, bus or train fare. ot include car payments.	12.	\$	225.00
	rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	25.00
	ritable contributions and religious donations	14.		0.00
5. <b>Insu</b>	-		•	0.00
	ot include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
15b.	Health insurance	15b.	\$	0.00
15c	Vehicle insurance	15c.		40.00
	Other insurance. Specify:	15d.	· ·	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.			0.00
Spec	sify:	16.	\$	0.00
	allment or lease payments:		•	
	Car payments for Vehicle 1	17a.	· · —	363.26
	Car payments for Vehicle 2	17b.	·	0.00
17c.	Other. Specify: PARDA Credit Union LOC	17c.	\$	94.00
17d.	Other. Specify:	17d.	\$	0.00
	payments of alimony, maintenance, and support that you did not report as		Φ	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106l).	18.	·	
	er payments you make to support others who do not live with you.	40	\$	0.00
Spec	·	19.		
	er real property expenses not included in lines 4 or 5 of this form or on Sched			000.00
	Mortgages on other property	20a.		223.00
	Real estate taxes	20b.	·	0.00
	Property, homeowner's, or renter's insurance	20c.		0.00
20d.	Maintenance, repair, and upkeep expenses	20d.		80.00
20e.	Homeowner's association or condominium dues	20e.	\$	0.00
. Othe	er: Specify:	21.	+\$	0.00
) Cale	ulate your monthly expenses	<del></del>		
	Add lines 4 through 21.		\$	2,963.63
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	2,303.03
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	2,963.63
3. Calc	ulate your monthly net income.		L	
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	4,117.80
	Copy your monthly expenses from line 22c above.	23b.	·	2,963.63
	100		·	2,000.00
23c.	Subtract your monthly expenses from your monthly income.			4 454 45
	The result is your monthly net income.	23c.	\$	1,154.17
4 Do:	ou avaget an increase or decrease in your evagees within the year often	ı filo thic	form?	
+. DU ¥	<b>ou expect an increase or decrease in your expenses within the year after you</b> xample, do you expect to finish paying for your car loan within the year or do you expect your n			or decrease because o
For e	ication to the terms of your mortgage?	ogago p	.,	
For e	ication to the terms of your mortgage?	o.tgago p	,	

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Fill in this info	ormation to identify your	case:				
Debtor 1	Jennifer Lynn Sw	viggum				
	First Name	Middle Name	Las	st Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	l a	st Name		
, ,						
United States I	Bankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINO	IS		
Case number						
(if known)						☐ Check if this is an
						amended filing
~						
	rm 106Dec					
Declara	tion About a	ın Individua	I Debt	or's Sche	dules	12/15
obtaining mon years, or both.		n connection with a bar				ement, concealing property, or 00, or imprisonment for up to 20
Did you p	pay or agree to pay some	one who is NOT an atto	orney to help	you fill out bankru	uptcy forms?	
■ No						
□ Yes.	Name of person				Attach Ban	kruptcy Petition Preparer's Notice,
						, and Signature (Official Form 119)
	nalty of perjury, I declare are true and correct.	that I have read the su	mmary and s	schedules filed with	n this declaration	on and
X /s/.le	ennifer Lynn Swiggum		х			
	ifer Lynn Swiggum		^	Signature of Debto	or 2	
	ture of Debtor 1			<b>5</b>		
Date	April 28, 2016			Date		
Date	April 20, 2010					

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	n this inforr	mation to identify you	r case:			
Deb	tor 1	Jennifer Lynn Strist Name	wiggum  Middle Name	Last Name		
Deb	tor 2	Tilstivalle	Widdle Name	Last Name		
(Spou	ise if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Ba	nkruptcy Court for the:	NORTHERN DISTRICT O	OF ILLINOIS		
Case	e number					
(if kno	_					Check if this is an
						amended filing
Oπ.	isial Es	was 407				
		<u>rm 107</u>	Affaira far Indivis	duala Filipa far B	) on leve up to v	***
			Affairs for Individ			4/16
					equally responsible for sur y additional pages, write yo	
		n). Answer every que		•		
Part	1: Give I	Details About Your Ma	rital Status and Where You	Lived Before		
1.	What is you	r current marital statu	s?			
	■ Name's d					
	<ul><li>Married</li><li>Not ma</li></ul>					
2.	During the I	ast 3 years, have you	lived anywhere other than	whore you live new?		
۷.		asi 3 years, nave you	iived allywhere other than	where you live now :		
	□ No ■					
	■ Yes. Lis	st all of the places you l	ived in the last 3 years. Do no	ot include where you live nov	V.	
	Debtor 1 Pr	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	idress:	Dates Debtor 2 lived there
	4135 Com Rockford,	pton Avenue IL 61101	From-To: <b>July 2002 - Ju</b> <b>2013</b>	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
	s and territor  No	<i>i</i> es include Arizona, Ca		vada, New Mexico, Puerto R	nity property state or territor ico, Texas, Washington and V	
Part	2 Expla	in the Sources of You	r Income			
	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
	□ No					
	Yes. Fil	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
		of current year untiled for bankruptcy:	■ Wages, commissions, bonuses, tips	\$16,685.42	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

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Case number (if known) Document Debtor 1 Jennifer Lynn Swiggum

					Debtor 1		Debtor 2	
					Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
			dar year: December	31, 2015 )	■ Wages, commissions, bonuses, tips	\$37,927.86	☐ Wages, commissions, bonuses, tips	
					☐ Operating a business		☐ Operating a business	
					☐ Wages, commissions, bonuses, tips	\$3,226.00	☐ Wages, commissions, bonuses, tips	
					Operating a business		☐ Operating a business	
			dar year be December		■ Wages, commissions, bonuses, tips	\$38,022.00	☐ Wages, commissions, bonuses, tips	
					☐ Operating a business		☐ Operating a business	
	and winr	other nings. each s	public bene If you are fil	fit payments; ing a joint cas he gross inco	pensions; rental income; interese and you have income that	amples of other income are ali rest; dividends; money collect you received together, list it or tely. Do not include income th	ed from lawsuits; royalties; an ily once under Debtor 1.	
					Debtor 1		Debtor 2	
					Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
			dar year: December	31, 2015 )	Capital Gains	\$4,145.00		
					Real Estate	\$-13,563.00		
Pa	rt 3:	List	Certain Pa	yments You	Made Before You Filed for	Bankruptcy		
6.	Are	eithei No.	Neither Deindividual	ebtor 1 nor Dorimarily for a	personal, family, or househo	umer debts. Consumer debts	_	1(8) as "incurred by an
			□ <sub>No.</sub> □ <sub>Yes</sub>		each creditor to whom you pa	id a total of \$6,425* or more in		
			* Subject	not include	payments to an attorney for t	nts for domestic support obligation his bankruptcy case. It is after that for cases filed on c	, , , , , , , , , , , , , , , , , , , ,	, ,
		Yes.			r both have primarily consure you filed for bankruptcy, di	umer debts. id you pay any creditor a total	of \$600 or more?	
			□ No.	Go to line 7				
			■ Yes	include pay		id a total of \$600 or more and bligations, such as child supp		

**Creditor's Name and Address** Dates of payment **Total amount** Amount you Was this payment for ... paid still owe Statement of Financial Affairs for Individuals Filing for Bankruptcy page 2 Case 16-81055 Doc 1 Filed 04/28/16 Entered 04/28/16 11:34:23 Desc Main Page 49 of 66
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Debtor 1 Jennifer Lynn Swiggum

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
Associated Loan Services Department PO Box 8879 Carol Stream, IL 60197-8879	Monthly	\$399.04	\$40,479.73	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other
Associated Loan Services Department PO Box 8879 Carol Stream, IL 60197-8879	Monthly	\$223.53	\$23,512.36	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other
PARDA Credit Union 5500 Forest Hills Road Loves Park, IL 61111	Monthly	\$361.78	\$22,172.04	<ul> <li>☐ Mortgage</li> <li>☐ Car</li> <li>☐ Credit Card</li> <li>☐ Loan Repayment</li> <li>☐ Suppliers or vendors</li> <li>☐ Other</li> </ul>
PARDA Credit Union 5500 Forest Hills Road Loves Park, IL 61111	Monthly	\$100.00	\$5,012.86	<ul> <li>☐ Mortgage</li> <li>☐ Car</li> <li>☐ Credit Card</li> <li>■ Loan Repayment</li> <li>☐ Suppliers or vendors</li> <li>☐ Other</li> </ul>
Within 1 year before you filed for bankruptout Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.  No Yes. List all payments to an insider.	rtners; relatives of any ge control, or owner of 20%	neral partners; partne or more of their voting	rships of which yo securities; and ar	u are a general partner; corporations ny managing agent, including one for
Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Jean Hullinger 4148 Packard Parkway, Unit A Rockford, IL 61101	September 2015	\$3,000.00	\$55,000.00	Sale of property, loan proceeds
Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos ■ No □ Yes. List all payments to an insider		yments or transfer a	ny property on a	ccount of a debt that benefited an
Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for this payment

7.

8.

still owe

paid

Include creditor's name

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Pa	rt 4: Identify Legal Actions, Repossession	s, and Foreclosures						
9.	Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?  List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.							
	□ No							
	Yes. Fill in the details.							
	Case title Case number	Nature of the case	Court or agency	Status of th	e case			
	People of the State of Illinois v. Jennifer Swiggum 2015 CM 940	Battery	Winnebago County 400 W. State Street Rockford, IL 61101	☐ Pending☐ On appe☐ Conclud	al			
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.							
	Creditor Name and Address	Describe the Property		Date	Value of the			
		, ,			property			
		Explain what happened						
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment becan No  Yes. Fill in the details.		luding a bank or financial ins	stitution, set off any a	amounts from your			
	Creditor Name and Address	Describe the action the	creditor took	Date action was	Amount			
	Creditor Name and Address	Describe the action the	creditor took	taken	Amount			
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or at  ■ No □ Yes		erty in the possession of an a	assignee for the bene	efit of creditors, a			
Pa	rt 5: List Certain Gifts and Contributions							
13.	Within 2 years before you filed for bankrup  ■ No □ Yes. Fill in the details for each gift.	tcy, did you give any gifts	s with a total value of more th	nan \$600 per person	?			
	Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift and	Describe the gifts		Dates you gave the gifts	Value			
	Address:							
14.	Within 2 years before you filed for bankrup	tcy, did you give any gifts	s or contributions with a tota	I value of more than	\$600 to any charity?			
	☐ Yes. Fill in the details for each gift or cont	ribution.						
	Gifts or contributions to charities that total more than \$600 Charity's Name	Describe what you	ı contributed	Dates you contributed	Value			

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Pa	rt 6: List Certain Losses					
15.	Within 1 year before you filed for bankru or gambling?	ptcy or s	since you filed for bankruptcy, did y	ou lose any	thing because of the	it, fire, other disaster,
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred		be any insurance coverage for the lot the amount that insurance has paid. L		Date of your loss	Value of property lost
			ce claims on line 33 of Schedule A/B:			
Pa	tt 7: List Certain Payments or Transfers	3				
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition p	preparin	g a bankruptcy petition?			rty to anyone you
	□ No					
	Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	ou"	Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
	BARRICK SWITZER LAW OFFICE 6833 Stalter Drive Rockford, IL 61108 Rockford, IL 61108 Debtor's mom		Attorney Fees and filing fee		February 1, 2016	\$1,535.00
17.	Within 1 year before you filed for bankru promised to help you deal with your cree Do not include any payment or transfer that  No Yes. Fill in the details	ditors or	to make payments to your creditor		or transfer any prope	rty to anyone who
	Yes. Fill in the details.  Person Who Was Paid		Description and value of any prop	ertv	Date payment	Amount of
	Address		transferred	city	or transfer was made	payment
18.	Within 2 years before you filed for bankr transferred in the ordinary course of you include both outright transfers and transfers include gifts and transfers that you have alr include yes. Fill in the details.	ı <b>r busine</b> s made a	ess or financial affairs? s security (such as the granting of a s			
	Person Who Received Transfer		Description and value of	Describe	any property or	Date transfer was
	Address  Person's relationship to you		property transferred		received or debts	made
	Third Party Couple Blackstone Avenue Rockford, IL 61101		Real estate jointly owned with husband; \$17,000.00		eeds of 00 payable to nd husband	September 2015
19.	beneficiary? (These are often called asset			elf-settled tro	ust or similar device	of which you are a
	Yes. Fill in the details.		December and value of the ware			Data Transfer was
	Name of trust		Description and value of the prope	erty transferr	eu	Date Transfer was made

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Debtor 1 **Jennifer Lynn Swiggum** 

Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of Name of Financial Institution and Type of account or Last balance Date account was Address (Number, Street, City, State and ZIP account number instrument closed, sold, before closing or moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still have it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

□ No

Yes. Fill in the details.

Owner's Name
Address (Number, Street, City, State and ZIP Code)

Jean Hullinger
4148 Packard Parkway, Unit A
Rockford, IL 61101

Where is the property?
(Number, Street, City, State and ZIP Code)

Describe the property

Value

Joint accounts, checking (\$600.00) and savings (\$600.00)

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Jennifer Lynn Swiggum

24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?						
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of any i	release of hazardous material?					
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or administ	trative proceeding under any envir	onmental law? Include settlements a	and orders.			
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Par	11: Give Details About Your Business or Conn	nections to Any Business					
27.	Within 4 years before you filed for bankruptcy, d	id you own a business or have any	of the following connections to any	/ business?			
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
	☐ A member of a limited liability company (	(LLC) or limited liability partnership	o (LLP)				
	☐ A partner in a partnership						
	☐ An officer, director, or managing executi	ve of a corporation					
	☐ An owner of at least 5% of the voting or €	equity securities of a corporation					
	■ No. None of the above applies. Go to Part 1	2.					
	Yes. Check all that apply above and fill in th	e details below for each business.					
		scribe the nature of the business	Employer Identification number				
	Address (Number, Street, City, State and ZIP Code)  Name of accountant or bookkeeper  Dates business existed						
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.						
	■ No □ Yes. Fill in the details below.						
	Name Date Issued Address (Number, Street, City, State and ZIP Code)						

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Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

1/s/ Jennifer Lynn Swiggum

Jennifer Lynn Swiggum

Signature of Debtor 1

Date April 28, 2016

Date

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

■ No
□ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inf	ormation to identify your	case:		
Debtor 1	Jennifer Lynn Sw			
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing
	orm 108			
Stateme	ent of Intentio	n for Indiv	iduals Filing Under Chapte	<b>r 7</b> 12/15
	ndividual filing under cha ave claims secured by yo	-	ii out this form it:	
_	eased personal property a		ot expired.	
You must file	this form with the court w	ithin 30 days after	you file your bankruptcy petition or by the date set	
	chever is earlier, unless th he form	e court extends th	e time for cause. You must also send copies to the	creditors and lessors you list
If two married	neonle are filing together	r in a joint case by	oth are equally responsible for supplying correct inf	ormation Both debtors must
	and date the form.	in a joint oase, se	an are equally responsible for supplying correct initial	ormation. Both debtors must
Be as comple	te and accurate as possib	le. If more space is	s needed, attach a separate sheet to this form. On the	ne top of any additional pages,
write	e your name and case nur	nber (if known).		
Part 1: List	Your Creditors Who Have	e Secured Claims		
1 For any cre	ditors that you listed in Pa	art 1 of Schedule F	c Creditors Who Have Claims Secured by Property	Official Form 106D) fill in the
information	below.			
identity the	creditor and the property t	nat is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	Associated Loan Serv	/ices	☐ Surrender the property.	□ No
name:	Department		Retain the property and redeem it.	
			Retain the property and enter into a	Yes
Description	of 515 Woodrow Stre	,	Reaffirmation Agreement.	
property	IL 61101-4962 Wir	nebago	☐ Retain the property and [explain]:	
securing de	bt:			-
Creditor's	Associated Loan Service Department	rices	☐ Surrender the property.	■ No
name:	Department		☐ Retain the property and redeem it.	☐ Yes
Description	of 4135 Compton Ave	anue	Retain the property and enter into a	<b>□</b> 169
property	Rockford, IL 61101		Reaffirmation Agreement.	
securing de	O = (	J	☐ Retain the property and [explain]:	
Creditor's	PARDA Credit Union		☐ Surrender the property.	■ No
name:			☐ Retain the property and redeem it.	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Retain the property and enter into a

Reaffirmation Agreement.

Description of 2014 Mitsubishi Outlander Sport

☐ Yes

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Debtor 1	Jenni	ifer Lynn Swiggum	Case number (if known)	
property securing		9,000 miles Decent shape	☐ Retain the property and [explain]:	
For any unin the info	nexpired rmation	n below. Do not list real estate le	Leases ou listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form ases. Unexpired leases are leases that are still in effect; the lease period has not ye lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).	
,		nexpired personal property leas		ned?
Lessor's n	ame:	Roberta Osland	□ No	
			■ Yes	
Descriptio Property:	n of leas	sed Written residential leas	•	
Part 3:	Sign Be	elow		
	,	perjury, I declare that I have ind ubject to an unexpired lease.	cated my intention about any property of my estate that secures a debt and any pe	rsonal
Jenr	nifer Ly	r Lynn Swiggum ynn Swiggum Debtor 1	Signature of Debtor 2	
Date	Ap	oril 28, 2016	Date	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-81055 Doc 1 Filed 04/28/16 Entered 04/28/16 11:34:23 Desc Main Document Page 61 of 66

B2030 (Form 2030) (12/15)

# **United States Bankruptcy Court**Northern District of Illinois

In re	Jennifer Lyn	n Swiggum		Case N	· 0.	
			Debtor(s)	Chapte	r <b>7</b>	
	DIS	SCLOSURE OF CO	OMPENSATION OF AT	TTORNEY FOR	DEBTOR(S)	
	compensation paid	to me within one year before	r. P. 2016(b), I certify that I am the re the filing of the petition in bank mplation of or in connection with	ruptcy, or agreed to be p	aid to me, for services	
	For legal servi	ices, I have agreed to accept	t	\$	1,200.00	
	Prior to the fili	ing of this statement I have	received	\$	1,200.00	
	Balance Due			\$	0.00	
2.	The source of the co	ompensation paid to me wa	s:			
	☐ Debtor	Other (specify):	Debtor's mom (Jean Hullin	ger)		
3.	The source of comp	pensation to be paid to me is	s:			
	Debtor	☐ Other (specify):				
4.	■ I have not agree	ed to share the above-disclo	osed compensation with any other	person unless they are m	embers and associates	s of my law firm.
	☐ I have agreed to copy of the agree	o share the above-disclosed eement, together with a list	compensation with a person or pe of the names of the people sharing	rsons who are not memb g in the compensation is	ers or associates of mattached.	y law firm. A
5.	In return for the ab	ove-disclosed fee, I have aş	greed to render legal service for all	aspects of the bankrupto	ey case, including:	
	<ul><li>b. Preparation and</li><li>c. Representation of</li></ul>	filing of any petition, scheoof the debtor at the meeting	and rendering advice to the debtor dules, statement of affairs and plar of creditors and confirmation hea	which may be required;	-	ınkruptcy;
	reaffirma	ions with secured cred ation agreements and a	itors to reduce to market valu pplications as needed; prepa ns on household goods.	ie; exemption plannii ration and filing of m	ng; preparation an otions pursuant to	d filing of 11 USC
6.	Represei		sclosed fee does not include the fon any dischargeability actions		nces, relief from s	tay actions or
			CERTIFICATION			
	I certify that the for cankruptcy proceedi		nent of any agreement or arrangem	nent for payment to me for	or representation of th	e debtor(s) in
4	April 28, 2016		/s/ Jason H	. Rock		
_	Date		Jason H. R			
			Signature of A	Attorney SWITZER LAW OFFIC	F	
			6833 Stalte	r Drive	_	
			Rockford, I	L 61108		
			Name of law	firm		

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# **United States Bankruptcy Court**Northern District of Illinois

		1 (of the H District of Himos		
In re	Jennifer Lynn Swiggum		Case No.	
		Debtor(s)	Chapter 7	
	VFI	RIFICATION OF CREDITOR M	(ATRIY	
	V 121	MITCATION OF CREDITOR W	AIKIA	
		Number of	Creditors:	40
	The above-named Debtor(s) is (our) knowledge.	hereby verifies that the list of credit	cors is true and correct to	o the best of my
Date:	April 28, 2016	/s/ Jennifer Lynn Swiggum  Jennifer Lynn Swiggum  Signature of Debtor		

Account Assure Plan Administrator PO Box 219 Roswell, GA 30077-0219

Associated Loan Services Department PO Box 8879 Carol Stream, IL 60197-8879

Associated Loan Services Department PO Box 8879 Carol Stream, IL 60197-8879

Capital Management Services, LP 698 1/2 South Odgen Street Buffalo, NY 14206-2317

Capital One Retail Services PO Box 71106 Charlotte, NC 28272-1106

Cardmember Service PO Box 790408 Saint Louis, MO 63179-0408

Comenity - Gordmans PO Box 659705 San Antonio, TX 78265-9705

Discover P.O. Box 6103 Carol Stream, IL 60197-6103

Diversified Adjustment Service, Inc PO Box 32145 Fridley, MN 55432-0145

Dr. Paul A. Galluzzo 6999 Redansa Drive Rockford, IL 61108

GI Pathology PO Box 1000 Dept. 46 Memphis, TN 38148-0001 Kohl's
P.O. Box 2983
Milwaukee, WI 53201-2983

Lowes/Syncrony Bank PO Box 530914 Atlanta, GA 30353-0914

MiraMed Revenue Group Dept. 77304 P.O. Box 77000 Detroit, MI 48277-0304

Mutual Management Services 7177 Crimson Ridge Drive P.O. Box 8740 Rockford, IL 61126-6235

Mutual Management Services 7177 Crimson Ridge Drive P.O. Box 8740 Rockford, IL 61126-6235

Northland Group Inc. P.O. Box 390846 Minneapolis, MN 55439

Northland Group Inc. PO Box 390905 Minneapolis, MN 55439

PARDA Credit Union 5500 Forest Hills Road Loves Park, IL 61111

PARDA Credit Union 5500 Forest Hills Road Loves Park, IL 61111

PayPal Credit PO Box 105658 Atlanta, GA 30348-5658 Roberta Osland 4135 Compton Avenue Rockford, IL 61101

Rockford Associated Pathologists PO Box 15785 Rockford, IL 61112-5785

Rockford Gastroenterology Assoc. 401 Roxbury Road Rockford, IL 61107

Rockford Health Medical Lab P.O. Box 138 Rockford, IL 61105

Rockford Health Physicians Department 4701 Carol Stream, IL 60122-4701

Rockford Memorial Hospital Dept. 4628 Carol Stream, IL 60122-4628

Rockford Mercantile 2502 S. Alpine Road Rockford, IL 61108

Rockford Mercantile 2502 S. Alpine Road Rockford, IL 61108

Rockford Mercantile 2502 S. Alpine Road Rockford, IL 61108

Rockford Radiology Assoc. P.O. Box 1790 Brookfield, WI 53008-1790

Sears Credit Cards PO Box 78051 Phoenix, AZ 85062-8051 Sprint
P.O. Box 4191
Carol Stream, IL 60197-4191

State Collection Service, Inc. P.O. Box 6250 Madison, WI 53716-0250

Swedish American Hospital PO Box 310283 Des Moines, IA 50331-0283

Synchrony Bank PO Box 9600061 Orlando, FL 32896-0061

Synchrony Bank PO Box 9600061 Orlando, FL 32896-0061

U.S. Cellular Dept. 2025 Palatine, IL 60055-0205

University of WI Medical Foundation P.O. Box 2978 Milwaukee, WI 53201-2978

Walmart/Syncrony Bank PO Box 530927 Atlanta, GA 30353-0927